

## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

05/01/00

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NYD096297544

INSTALLATION NAME

**CYTEC OLEAN INC** 

INSTALLATION ADDRESS

1405 BUFFALO ST OLEAN, NY 14760-1139

MAILING ADDRESS

1405 BUFFALO ST OLEAN, NY 14760-1139

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22<sup>nd</sup> Floor New York, NY 10007-1866

ATTN: JACK HOYT

Tel: (212) 637-4106 Fax: (212) 637-4949

TO: CYTEC OLEAN INC or Current Occupant
ATTN: PETERS, GERRET - SITE GEN MGR

1405 BUFFALO ST OLEAN, NY 14760-1139

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## Notification of Regulated Waste

(For Official Use Only)

of the Resource Conservation and Recurery Act).  United State	Activity s Environmental Protection Agency	
1. Installation's EPA ID Humber (Mark X' In the appro	opisic boi	
A First Notification B. Subsequent Noticement Notification Complete Item Complete	THE PROPERTY OF THE PROPERTY O	on's EPA ID Number
II. Name of Installation (Include company and specif	1 / 9 0 / 4	
CYTEC OLEAN I	NC	
III. Location of installation (Physical address not P.C. Street Requires building number or Lot and I		SYNCLUS COLUMN
Street Requires building number, or Lot and I	STREET	on from the nearest cross street
Street (continued)		
City or Town	State 71P Code	
OLEANIIII	State ZIP Gode	60-1139
County Code County Name	13/11/1	1001 11111911
CATTARAUGU	S	
IV. Installation Mailing Address (See Instructions)	<b>&gt;</b>	$\times$
Street or P.O. Box		
City or Town	State ZIP Code	
	ZIP GOOR	
V. Installation Contact (Person to be contacted regs	arding waste activities at aire)	
Name (fast)	(first)	
PETTERS	GERRET	
Job Title	Phone Number (area code and	
Visinataliation Contact Address (See Instructions)	1. 11 6 - 5 1 2 -	1916 5 0
A. Contact Address To City of C. Cons.		
City or Town	State ZIP Code	
VII Ownership (See Instructions)		
	OLORD)	
CHTECHTNDUSTO	TIES TINC	
Street, P.O. Box, or Route Number		
FIVE GARRET P	10UNTAIN PE	AZA :
City or Town	State ZIP Code	
MEST PATERSON	J. Land Type C. Owner Type D. Change of O	112141-111
Phone Number (area code and number)	Indicator	winer (Dats Changed) Month Day Year
171/121-13151/1-121/-1010	F P YEE NO	

	des and a sequence			ii Ose Chily
/III. Type of Regulated Waste Activit	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	riate bares. Refer (d	interve-large	
A. Hazardo	Js Wasia Activity		EL ligra (III FAG) /	CEVIL'66
a. Greater than 1000kg/mc (2,200 li	a installation	CONTRACTOR OF THE PARTY OF THE	d 1 Off-Specific	don Leed Oil Fuel
b. 100 to 1000 kg/mo (220 + 2:200)	DE ) 4 HEZENDOUS	/// see manactors.	a. Generato	Marketing to Burn
C. Less train 100 kg/mo (220 lbs.)     Transporter (indicate Mode in boxes	a. Generati	or Marketing to Burner	ti. Other Ma	ndicate devicate
a. For own waste only		erkenene Ki/or triclustrial Futtiace	Lype of C	Ombustion Device By Boller
ti. For commercial purposes  Mode of Transportation		FREITE Deterral	2. H	Natrial Boller
1. Air 2. Rail	Indicate	mail Guardty Exemption Type of Combustion	3 ind	tustrial Furnace
3. Highway	Device(s	) fffly Boller	2. Specification	Used Oil Fuel Mer
4. Water 5. Other - specify		idustrial Boller	Ciaims the Q Specification	turner) Who First # Meets the
	B. Undarging	dustrial Furnace		
Description of Remisser Wasser				
Description of Regulated Wastes  Characteristics of Nonlisted Hazardou wastes your installation handles. (See 4)		***************************************	B Characteristics of "	
£	Toxicity	specially (J t)	A MINISTER OF NOURS	BO nazardous
MOOTE MOODE TOOLS	Cheracteristic (E)000) (List specific EPA	Linkzartičus waste pumberisi for	the Todoty characteratic contan	
	DOC	19 DO4	0 0035	POO
Listed Hazardous Wastes. (See 40 CF	3 261.31 - 33. See Instruction	ns If you need to list mor	e than 12 waste codes.)	
1 2	3	4	5	- 6
101013 F101015	4223	4158		
8	9	10	11	12
Other Wastes. (State or other wastes re-	quiring a handler to have an	I.D. number. See instruk	tions.)	
1 2	3	4	5	- 6
		3 3 3		
ertification				
ordfy under positity or law that this cordance with a system designed	document and all attach	ments were prepared	d under my direction	or supervision i
mitted. Based on my inquiry of the	person or persons who m	anage the system, or	gamer and evaluate those persons directi	the information
mplete. I am aware that there are significant or si	inificant penalties for sub-	ne best of my know. mitting false informat	ledge and belief, trui ion, including the pos	e, accurate, and sibility of fine and
atural DA	Name and Official Title	***************************************		·
ature must be an original signature	C. MOTEUR		Date Signed	0
Pointinieries	ov all samplovee of the	Generalor.		
	Table 1.23			
NAME CHANG	20		es es es es es es especial	
e: Mail completed form to the appropr	late EPA Regional or State (	Office (Fac S		
Form 8700-12 (Pay 9-92) Prayleus a		Jince. (300 Section III	or the booklet for addre	18808.)

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Please print or type with ELITE type (12 characters per inch) in the unshaded areas only CMB No. 2050-0028. GSA No. 0246-EPA-07 Promition of the process of the common of th Noilleallon of **Date Received** 30 (For Official Use Only) 4GIVIEV Billion School Paylor Harris (Propriet PHELOGICAL SEALE HUMBLISH WESSERVER A DESOCRATION SEALER FOR THE SEALER នេះ (១០១៩២៣៩៤៣ (១០១២១៤៣៩) NYD09629 H.N. and to substitution (the Do Oceania 1988 and the tell Consult) (III) sociations of single Hallons (Physical Saudinant) (1085, 0) shows a significant of the physical states (1000) (1000 Requires building number, or Lot and block number or the distance and direction from the nearest cross street ż. Street (continued) City or Town Sinte 7/12/2001 County Code County Name IV. Installation Matting Address (See Instructions) Street or P.O. Box City of Town State ZIP Code Valuataliation Contact (Person to be contacted regarding waste activities at airo Name (last) (first) Job The Phone Humber (area code and number) VI Installation Contact Address (See Instructions) A. Contact Address R Fig. 4 ~~ Location Mailing City or Town Side ZIP Code VII Ownership (See Instructions) A. Harne of installation's Legal Owner \* 《よみいう Coolba) Street, P.O. Box, or Route Number City or Town State ZIP Code B. Land Type C. Owner Type Phone Number (area code and number) D. Change of Owner (Date Changed) & Month Dey Year Indicator No

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VIII. Type of Repulated Waste Activity (Mark	New State (September 1995)	SCICACONE:	Elon	
A. Hazardous Wasa		The state of the s		-
1. Generator (See Instructions)	S. STREET, Street, Planning	Accessed the second		100
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	Symptomic Street Street Street			autoria ilin
Z TRIBOTHE BOILD (100 TOTAL)	A Street with paying a	S.Disper	A 12 THE TO BE	ورونهم بهموسيه
a. For own waste only  0. For commercial purposes	Company (Company)		L side (	
Mode of Transportation	Smelter Seturn 2. Smelter Starrity		E policii	al Ecolor
L 1 Air	filled to the second		& Francis	N Expres
3. Highway	Periods  1. Lifely Boles		2. Specification see	
4. Water	Z. Province Boles	and the same		
5. Other – specify	4. Inclusive Surre		Specification	
	A supplied to the second of		* * * * * * * * * * * * * * * * * * * *	
D. Description of Regulated Wastes (Use add	Homeleticomistomassay)	<b>&gt;</b>		
Wastes your installation handles. (See 40 CFR Part	200000000000000000000000000000000000000	ding to the charac	teristics of nonlisted h	zardoue
1. igritable 2. Corrosive 3. Reactive Characterist				
(D003) (D000) (D000)	(Lie specific SIA) stratificativement	Alleber(\$) corum (coch	Characteristic contemporary	
	DO1.8 D	0227	0000	
B. Listed Hazardous Wastes. (See 40 CFR 261.31 -	33. See instructions if you need	to list more than 12	wasta codes	
1 2 2 5 6 6 6 6	3 3		5	- E
7 8 -	9 10		-11	
C. Other Wastes. (State or other wastes requiring a he	poles to be a second to			
1 2 2	sees to have an i.D. number. S	ee instructions.) .		
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Name (	and Official Title (type or print	0.41	Date Signed	
Comment	inployee of the Generator.	G.M.	4/18/00	
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A / il 1/12 / 1 / 1 / 1				
MAME CHANGE		169.594	Cor	
ote: Mail completed form to the appropriate EPA Re PA Form 8700-12 (Rev. 9-92) Previous additional	gional or State Office Can Sa	ction !!'		
A Form 8700–12 (Rev. 9–92) Previous edition is obs	olete2-	cuon III of the bo	oldet for addresses.)	1

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